UTILITY PATENT APPLICATION TRANSMITTAL							
						⊠ Dl	JPLICATE
Address to: Box PATENT APPLICATION Commissioner of Patents P.O. Box 1450 Alexandria, VA 22313-1450				Attorney Docke	t No.	CHAN3220/EM	Ç
				First Named Inv (or identifier)	ventor	⁄ung-Ta CHAN	
				Total Pages	3	34	
Transmitted herewith is a patent application under 37 CFR 1.53(b).							
Entitled: A Burst Transfer Mechani Over USB Bus				m Of Network Packets Having MAC Frames			
⊠ 1.	Submitted herewith are the following:						
	17 pages of specification, including claims and Abstract. 5 sheets of FORMAL drawings (Figs. 1-5). 6 claims. 1 Oath/Declaration signed by each inventor. 1 Application Data Sheet. 1 Assignment of the invention to Asix Electronics Corporation Ltd., Hsinchu, Taiwan, R.O.C., Cover Sheet, and payment of the \$40 recordal fee. 1 check in the amount of \$425 (\$385- Filing Fee; \$40- Assignment Recordation Fee).						
⊠ 2.	SMALL ENTITY STATUS IS ASSERTED pursuant to 37 CFR 1.27 for this application.						
⊠ 3.	The Commissioner is authorized to credit any overpayment and charge any deficiency in any fees required under 37 CFR 1.16 and/or 1.17, to Deposit Account No. 02-0200.						
□ 4.	Insert before the first sentence of the specification: This application claims the benefit of provisional application number filed						
□ 5.	Insert before the first sentence of the specification: This application is a Continuation-in-part of nonprovisional application number filed						
□ 6.	Other:						
The registered practitioners representing applicant(s) are J. Ernest Kenney, Reg. No. 19,179; Eugene Mar, Reg. No. 25,893; Richard E. Fichter, Reg. No. 26,382; Thomas J. Moore, Reg. No. 28,974; Joseph DeBenedictis, Reg. No. 28,502; and Benjamin E. Urcia, Reg. No. 33,805.							
THE FILING FEE IS CALCULATED AS FOLLOWS: Basic Fe							\$770.00
Total Claims: 6		- 20 =	_	0	X \$18 =	\$0.00	
Independent Claims:		1	- 3 =		0	X \$86 =	\$0.00
Corresponden BACON &	ce Address: THOMAS, F	PLLC	23364	4	Multiple Dependent Claim (add \$290.00):		\$0.00
625 Slaters	s Lane, 4 ^{th′} F , VA 22314-	loor	CUSTOMER NUM	1BER	Subtotal:		\$770.00
					50% Reduction if Small Entity Status:		\$385.00
Phone: 703-683-0500 Fa				03-683-1080	Total:		\$385.00
Date:			Name:		Signature:		Reg. No.

Eugene Mar

October 17, 2003



25,893

Application or Docket Number

CHAN 3220/EM PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003 CLAIMS AS FILED - PART I **SMALL ENTITY** OTHER THAN (Column 1) (Column 2) TYPE [OR SMALL ENTITY **TOTAL CLAIMS** RATE FEE RATE FEE **FOR** OR BASIC FEE NUMBER FILED NUMBER EXTRA **BASIC FEE** 385.00 770.00 TOTAL CHARGEABLE CLAIMS X\$ 9= X\$18= OR INDEPENDENT CLAIMS minus 3 = X43 =X86= OR MULTIPLE DEPENDENT CLAIM PRESENT +145 =+290= OR * If the difference in column 1 is less than zero, enter "0" in column 2 38 S TOTAL TOTAL OR CLAIMS AS AMENDED - PART II **OTHER THAN** SMALL ENTITY OR **SMALL ENTITY** (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDI-ADDI-4 REMAINING NUMBER PRESENT TIONAL AMENDMENT RATE RATE TIONAL **AFTER PREVIOUSLY EXTRA AMENDMENT** PAID FOR FEE FEE Total Minus X\$ 9= X\$18= OR Independent Minus *** X43 =X86= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +290= +145= OR TOTAL TOTAL OR ADDIT, FEE ADDIT, FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDI-ADDI-REMAINING NUMBER PRESENT **AMENDMENT** RATE TIONAL AFTER RATE TIONAL **PREVIOUSLY EXTRA** AMENDMENT PAID FOR FEE FEE Total Minus X\$ 9= X\$18=OR Independent Minus = *** X43 =X86= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +145= +290= OR TOTAL TOTAL OR ADDIT. FEE ADDIT, FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ပ ADDI-ADDI-REMAINING NUMBER **PRESENT AMENDMENT AFTER** RATE TIONAL **PREVIOUSLY EXTRA** RATE TIONAL **AMENDMENT** PAID FOR FEE FEE Total Minus X\$ 9= X\$18= OR Independent Minus *** = X43 =X86= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +145= +290= OR * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. TOTAL TOTAL ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." OR ***If the "Highest Number Pr viously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEE ADDIT, FEE

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.